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FACSIMILE COVER SHEET

TO: Examiner: Scott E. Beliveau Group Art Unit: 2623

FROM: John D. Magluyan, Reg. No. 56,867

**RE:** U.S. Application No. 09/668,465

Attorney Docket No. 00169.001856.

**FAX NO.:** (571) 273-8300

DATE: November 6, 2006 NO. OF PAGES: 28

(including cover page)

TIME: 4:42 p w . SENT BY: Charise

#### **MESSAGE**

Attached are the following papers for the above-identified application:

1. Amendment; and

2. Transmittal for Amendment.

Thereby certify that this correspondence is being facsimile transmitted via facsimile to the U.S. Patent and Trademark Office at (571) 273-8300, on:

November 6, 2006 (Date of Deposit)

John D. Magluyan, Reg. No. 56,867 (Name of Attorney for Applicants)

Date of Signature

November 6, 2006

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NOV 0 6 2006

In re Application of:

Docket No.

MIKHAIL PROKOPENKO, et al.

00169.001856.

Application No.: 09/668,465

Examiner: Scott E. Beliveau

Filed: September 25, 2000

Group Art Unit: 2623

For: TELEVISION PROGRAM RECOMMENDATION

SYSTEM

Date: November 6, 2006

Mail Stop Amendment THE COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

		C	LAIMS AS AMEN	NDED		
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	59	MINUS	.86	0	x \$25 \$50	\$.00
INDEP. CLAIMS	5	MINUS	6	= 0	x \$100 \$200	\$.00
Fee for Multiple Dependent claims \$180°/\$360						\$.00
			TOTAL ADDITI			\$.00

If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

	Verified Statement claiming small entity status is enclosed, if not filed previously.
	A check in the amount of \$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
	A check in the amount of \$ to cover the fee for a month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,
	John D. Magleyan Attorney for Applicants Registration No.: 56,867

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3800 Facsimile: (212) 218-2200

Form #120

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00169.001856.

## PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	)		
MIKHAIL PROKOPENKO, et al.	; )	Examiner: Scott E. Beliveau  Group Art Unit: 2623	
Application No.: 09/668,465	)		
Filed: September 25, 2000	) :		
For: TELEVISION PROGRAM RECOMMENDATION SYSTEM	)	November 6, 2006	
Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450			

#### **AMENDMENT**

Sir:

In response to the Office Action dated August 28, 2006, please amend the above-identified application, as follows:

		ndence is being transmitted via facsimile k Office at (571) 273-8300, on:
	Novemi	ьст 6, 2006
	(Date of	Transmission)
	John D. Magluy	van, Reg. No. 56,867
	(Name of Attor	ncy for Applicants)
26.K	Most	November 6, 2006
	Signature	Date of Signature